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 ATTORNEY WITH  
 NEW POWER OF ATTORNEY  
 AND  
 CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	1010171030
Filing Date	12/14/2001
First Named Inventor	MATZ
Art Unit	21601
Examiner Name	QUELETTE
Attorney Docket Number	BS 01378

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
 Customer Number:

38516

OR

☒ Firm or  
 Individual Name Scott P. Zimmerman PLLC

Address P.O. Box 3822

City Cary State NC Zip 27519

Country USA

Telephone (919) 459-2629 Email scot@scotzimmerman.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name Scott P. Zimmerman

Date

Telephone (919) 459-2629

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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&  
37 C.F.R. § 3.73 EXCLUSION OF INVENTIVE ENTITY**

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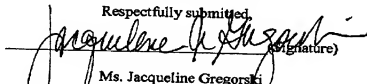
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**2) 37 C.F.R. § 3.73 EXCLUSION OF INVENTIVE ENTITY**

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Respectfully submitted,

  
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Vice President, Patent & Trademark Procurement  
06/05/2007 (Date)

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